



Attorney Docket No.: 59694 (47793)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Takashi KOASE, *et al.* Conf. #1751
U.S.S.N.: 10/635,163 Art Unit: 3682
FILED: August 5, 2003 Examiner: Johnson, Vicky A.
FOR: A BELT DRIVING APPARATUS AND A LIQUID EJECTING APPARATUS

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By

Nicole M. McKinnon

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RESPONSE TO RESTRICTION REQUIREMENT

Sir:

This is in response to the Office Action dated April 20, 2005 in the above-captioned case.

In response to the invention election, Applicants elect Group I (claims 1 - 7).

It is not believed that a fee is required. However, if a fee is required you are hereby authorized and requested to charge/credit Deposit Account No. **04-1105**.

Respectfully submitted,

Date: May 20, 2005
Customer No.: 21874
492126

By:

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Application No. (if known): 10/635,163

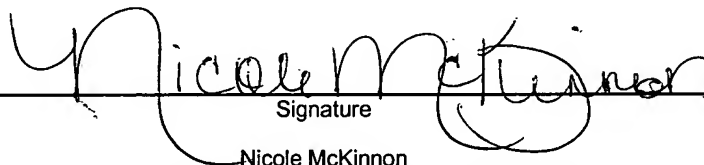
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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/635,163-Conf. #1751
	Filing Date	August 5, 2003
	First Named Inventor	Takashi Koase
	Art Unit	3682
	Examiner Name	V. A. Johnson
Total Number of Pages in This Submission	Attorney Docket Number	59694 (47793)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Express Mailing; and return receipt postcard.
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS & ANGELL, LLP		
Signature			
Printed name	John J. Penny		
Date	May 20, 2005	Reg. No.	36,984

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Dated: May 20, 2005

Signature: (Nicole McKinnon)